FORM D

SEC Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

JUL 18ZUUR

Washington, DC

< 101

NOTICE OF SALE OF SECURITIES

PURSUANT TO REGULATION D,

SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

1440750							
OMB APPR	OVAL						
OMB Number:	3235-0076						
Expires:							
Estimated average burden							
hours per response 16.00							

SEC USE ONLY					
Prefix	Serial				
DATE RE	CEIVED				
İ	1				

Type of Filing: New Filing Amendment 1. Enter the information requested about the issuer	A. BASIC IDENTIFICATION DATA	
Name of Issuer (check if this is an amendment and	nd name has changed, and indicate change.)	08056538
Northern Prairie Specialty Oils, LLC		
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
PO Box 70, Munich, North Dakota, 58352		701-400-9712
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business		
01		.
Oilseed processing		
· · · · · · · · · · · · · · · · · · ·		- PROCESSED
Type of Business Organization	<u> </u>	PROCESSED
Type of Business Organization corporation limited 1		PROCESSED please specify): AUI 242000
Type of Business Organization corporation limited 1	amusashin sa ha faamad	ility company
Type of Business Organization corporation limited 1	partnership, to be formed Limited liabi	PROCESSED Please specify): JUL 2 4 2008 THOMSON REUTERS

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

– ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

Directors Continued:

Van Dam, John 221 Briggs Avenue North Park River, ND 58270-4506

Weston, Kent 10771 Highway 20 Sarles, ND 58371

Mickelson, Bill Cabin Route 1 Rolla, ND 58367

Pankratz, Chad 9252 80th Ave NE Munich, ND 58352

Becker, Paul 9250 58th Street NE Crary, ND 58327

A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer. Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. General and/or Check Box(es) that Apply: Promoter ■ Beneficial Owner Executive Officer Director Managing Partner Full Name (Last name first, if individual) Anderson, Bryan Business or Residence Address (Number and Street, City, State, Zip Code) 714 Ryan Street, PO Box 117, Munich, ND 58352 Check Box(es) that Apply: Beneficial Owner Executive Officer General and/or Promoter Director Managing Partner Full Name (Last name first, if individual) Schommer, Craig Business or Residence Address (Number and Street, City, State, Zip Code) 702 Main Street, Munich, ND 58352 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer General and/or 7 Director Managing Partner Full Name (Last name first, if individual) Pankratz, Pankratz Chris Business or Residence Address (Number and Street, City, State, Zip Code) 9578 84th Ave. NE, Munich, ND 58352 Check Box(es) that Apply: ☐ Beneficial Owner Executive Officer General and/or Managing Partner Full Name (Last name first, if individual) Muhs, Michael Business or Residence Address (Number and Street, City, State, Zip Code) 9595 County 23, Langdon, ND 58249 Check Box(es) that Apply: Promoter ☐ Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Teubner, Jeff Business or Residence Address (Number and Street, City, State, Zip Code) 1302 4th Ave., Cando, ND 58324 Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer General and/or ✓ Director Managing Partner Full Name (Last name first, if individual) Zimmer, Mike Business or Residence Address (Number and Street, City, State, Zip Code) 107 1st Avenue, PO Box 215, Munich, ND 58352 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Hall, Kelly Business or Residence Address (Number and Street, City, State, Zip Code) 8540 87th Ave. NE. Munich, ND 58352 (Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	B. INFORMATION ABOUT OFFERING												
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							Yes	No ⊯					
١.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.							Ľ					
2.	2. What is the minimum investment that will be accepted from any individual?								\$ 26,	012.28			
									Yes	No			
3.								R					
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.												
	Full Name (Last name first, if individual) Ascendant Financial Partners, LLC												
			Address (N		d Street, C	ity. State. 7	(in Code)						
			uite A-4000				-				٠.		
Naı	me of As	sociated Br	oker or De	aler							- -		
Sta	tec in Wh	ich Percon	Listed Has	Solicited	or Intends	to Solicit	Purchasers					•	
Jia			s" or check							************		☑ Al	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (Last name	first, if indi	ividual)									
Bus	siness or	Residence	: Address (N	Number an	d Street, C	ity, State,	Zip Code)						
Nar	me of As	sociated Br	oker or Dea	aler					., .				
Sta	=		Listed Has										
	(Check	"All States	or check	individual	States)			***************************************		***************************************		☐ Al	l States
	AL IL MT RI	AK IN NE SC	AZ IA NV SD	KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	Full Name (Last name first, if individual)												
Business or Residence Address (Number and Street, City, State, Zip Code)													
Name of Associated Broker or Dealer													
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers													
(Check "All States" or check individual States)								1 States					
	AL AK AZ AR CA CO CT DE DC FL GA IL IN IA KS KY LA ME MD MA MI MN MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI								HI MS OR WY	ID MO PA PR			

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	•	
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	2	c
	Equity		
	Common Preferred	D	5
		r	r
	Convertible Securities (including warrants)		
	Partnership Interests		
	Other (Specify Ordinary membership interests		
	Total	13,202,309.00	\$_0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$_0.00
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
		Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		<u>\$</u> 2,500.00
	Legal Fees	Z	\$ 25,000.00
	Accounting Fees		\$ 2,500.00
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately)	_	\$ 792,139.00
	Other Expenses (identify) Travel and administrative		\$ 20,000.00
	Total		s 842.139.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS						
	b. Enter the difference between the aggregate off and total expenses furnished in response to Part C – proceeds to the issuer."	- Question 4.a. Th	nis differen	ce is the "adjusted gr	ross	\$	
5.	Indicate below the amount of the adjusted gross peach of the purposes shown. If the amount for a check the box to the left of the estimate. The total proceeds to the issuer set forth in response to Pa						
					Payments to		
					Officers. Directors, & Affiliates	Payments to Others	
	Salaries and fees			***************************************	🗆 \$		
	Purchase of real estate	***************************************			🗆 \$	\$ 156,000.00	
	Purchase, rental or leasing and installation of mand equipment		2 \$ 4,000,000.00				
	Construction or leasing of plant buildings and fa	acilities	•••••		🗀 \$	_ [] \$_7,359,300.00	
	Acquisition of other businesses (including the v offering that may be used in exchange for the as issuer pursuant to a merger)	alue of securities sets or securities	involved i of another	n this			
	Repayment of indebtedness					_	
	Working capital						
	Other (specify):						
						_	
		- · · · · · · · · · · · · · · · · · · ·			🗀 \$		
	Column Totals		******************		S 0.00	\$ 12,360,170.00	
	Total Payments Listed (column totals added)					2,360,170.00	
Г		D. FEDERA	L SIGNA	TURE			
sign	issuer has duly caused this notice to be signed by the lature constitutes an undertaking by the issuer to fornation furnished by the issuer to any non-ac	urnish to the U.S.	Securities	and Exchange Com	mission, upon writte		
Iss	er (Print or Type)	Signature		<i>H</i>	Date		
	rthern Prairie Specialty Oils, LLC			(/	<i>X</i>	16, 2008	
	ne of Signer (Print or Type)	Title of Signer	(Rint or	Туре	1 -34-19	<u> </u>	
	in Anderson	President					

END

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)